The Maritime Medical Aews,

A JOURNAL OF MEDICINE, SURGERY AND OBSTETRICS.

VOL. II.

NOVEMBER, 1890.

No. 6

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SURGERY OF TO-DAY.

By J. F. Black, M. D.

Read at Meeting Nova Scotia Medical Society, Granville Ferry, July, 1890.

IN considering the present position of Surgery either as a science or an art, we are struck in the first place by the fact that it no longer holds, as it so long did, a subordinate position to its sister department—Medicine. For although custom still leads us to speak of physicians and surgeons, I do not think it is because the former can now claim any preeminence, and unless they look to their laurels it will soon be in order for the position of things to be reversed. At all events the days when surgery was only a higher department of work of the Knights of the Razor and Scissors have long passed by, and we can now fairly claim for it at least an equal position to that held by its more pretentious rival.

This contention would seem to be fully borne out if we consider the immense strides which surgery has made in the last twenty years. While medicine doubtless has made steady progress and is far in advance of what it was in the days of our fathers, still there have been none of the brilliant successes and grand achievements which have made the surgery of to-day almost phenomenal. And if it is urged that the improvements after all in surgery have been only in matters of detail and have involved no great amount of brilliancy of thought or research—we reply that the principles established and the results obtained would never have been had unless by patient and continuous work and study followed by careful and thorough reasoning on the part of capacious intellects

In looking at modern surgery I think we may justly characterise it as the Surgery of Cavities. We

have not of late made any very essential changes in the way we treat fractures, or perform amputations, or remove external growths, or tie arteries, or operate for hernia, or reduce dislocations. In these, as in all other surgical procedures of course we are constantly making improvements, but it is when we come to deal with the internal cavities of the body that we particularly notice what a vast difference there is between the surgery of to-day and that of the past—even the quite recent past.

Parts which formerly were looked on as utterly inaccessible and to be avoided with a sort of holy horror are now approached with the utmost freedom and apparent recklessness. Whether it be the interior of the skull containing the most sacred of all the organs of the body, or the abdominal cavity so long a terra incognita to the surgeon and only revealed on the post mortem table, or the cavity of the thorax with its highly vital contents, or the interior of the large joints, or the inside of the bladder, or the stomach, or the bowel, no internal cavity is safe from the prying eyes and the audacious fingers and instruments of the surgeons of to-day, and there is hardly a disease of any of these parts which has not been dealt with more or less successfully, as a result of our modern resources and our modern confidence in our ability to go where formerly we halted on the brink, and let our patients die unrelieved.

Of course no account of modern surgery would be complete without a reference to Antiseptics. And however we may differ as to the exact present position and value of germicides and of simple cleanliness, it would be folly as well as base ingratitude to wink out of sight the fact that it is to the introduction of Antiseptic practice and to that greatest of modern surgeons, Sir Joseph Lister, that we really owe most of the advances which we have made.

Without Listerism we would never have dared to